Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or <u>Fax</u>

ax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

| 23117 7  | CE ADDRESS (Note: Use Block 1 for 590 09/27/2005  | any change of address)   | Fee(s) Transmittal, 7   | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.   |  |  |
|--|---|--|---|--|--|--|
| NIXON & VAN<br>901 NORTH GLE<br>ARLINGTON, VA  | BE ROAD, 11TH FLO   | OOR  | I hereby certify that<br>States Postal Service<br>addressed to the M<br>transmitted to the US   |  |  |  |
| 2/27/2005 MBEYENE2 0000  | 0033 10622566   |  |   |  | (Depositor's name)   |  |
| FC:1501<br>PFC:1504<br>FC:8001   | 1400.00 OP<br>300.00 OP<br>12.00 OP   |  |   |  | (Signature)<br>(Date)  |  |
| APPLICATION NO.  | FILING DATE   | FIRST NAM  | ED INVENTOR   | ATTORNEY DOCKET NO.  | CONFIRMATION NO.   |  |
| 10/622,566   | 07/21/2003  | Kiyoshi  | ge Ohmori   | 829-613  | 4790   |  |
| TITLE OF INVENTION:<br>CIRCUIT FABRICATION   | METHOD FOR CREATING   | G MASK PATTERN FOR C   | IRCUIT FABRICATION ANI  | O METHOD FOR VERIFYIN  | IG MASK PATTERN FOR  |  |
| APPLN. TYPE  | SMALL ENTITY  | ISSUE FEE  | PUBLICATION FEE   | TOTAL FEE(S) DUE   | DATE DUE   |  |
| nonprovisional   | NO  | \$1400   | \$300   | \$1700   | 12/27/2005   |  |
| EXAMINER   |   | ART UNIT   | CLASS-SUBCLASS  | 7  |  |  |
| SIEK, VUTHE  |   | 2825   | 716-019000  | _  |  |  |
| PTO/SB/47; Rev 03-02<br>Number is required.  3. ASSIGNEE NAME AND                      | s an assignee is identified by<br>n 37 CFR 3.11. Completion                                     | listed, no E PRINTED ON THE PATEN clow, no assignce data will ap of this form is NOT a substitut  (B) RESIDEN  | d attorney or agent) and the nared patent attorneys or agents. or name will be printed.  IT (print or type)  Opear on the patent. If an assign of filing an assignment.  ICE: (CITY and STATE OR COLOR)   | gnee is identified below, the o  | document has been filed for  |  |
| Please check the appropriate   | e assignee category or catego   | ries (will not be printed on the   | patent): 🗖 Individual 🖾   | Corporation or other private gr  | roup entity Government   |  |
| 4a. The following fee(s) are   | enclosed:   | 4b. Payment o  | ` '   |  |  |  |
| ☑ Issue Fee  |   |  | A check in the amount of the fee(s) is enclosed.  |  |  |  |
|  |   |  | ent by credit card. Form PTO-2038 is attached.  Director is hereby authorized by charge the required fec(s), or credit any overpayment, to  |  |  |  |
|  |   | Deposit Ac   | count Number 11-114   | (enclose an extra c  | copy of this form).  |  |
|  | (from status indicated above MALL ENTITY status. See  |  | icant is no longer claiming SM  | ALL ENTITY status. See 37 C  | CFR 1.27(g)(2).  |  |
| The Director of the USPTO<br>NOTE: The Issue Fee and P<br>interest as shown by the rec | is requested to apply the Issu<br>bublication Fee (if required) vords of the United States Pate | ue Fee and Publication Fee (if a will not be accepted from anyonent and Trademark Office.  | any) or to re-apply any previou<br>ne other than the applicant; a re  | sly paid issue fee to the applicate statement of the stat | ation identified above.<br>he assignee or other party in                           |  |
| Authorized Signature   | P   |  | DateD   | ecember 22, 200  | 5  |  |
| Typed or printed name _  | Joseph A. R   | hoa  | Registration  | on No. 37,515  |  |  |
| this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313-    | s for reducing this burden, shinia 22313-1450. DO NOT 1-1450.                                   | O. Time will vary depending to the Chief Information of the Chief Infor | d to obtain or retain a benefit by ollection is estimated to take 12 upon the individual case. Any mation Officer, U.S. Patent and D FORMS TO THIS ADDREST OF | comments on the amount of ti<br>d Trademark Office, U.S. Dep<br>SS. SEND TO: Commissioner  | ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, |  |
|  | and Act of 1999, no persons   | are required to respond to a ce  | meedon of information unless t  | uspiays a valid OMB contro   | number.  |  |